PART B - FEE(S) TRANSMITTAL										
DEC 0 6 2004 9	mplete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (703) 746-4000									
INSTRUCTIONS: This for appropriate. All further cor indicated unless breeted to maintenance fee notification	or Fax (703) 746-4000 STRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh polyprinate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address ndicated pulses befrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" naintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of									
	E AD	DRESS (Note: Use Block 1 for 09/20/2004	any change of address)		Fee(s) Transmittal. The papers. Each additional	mailing can only be used f is certificate cannot be used al paper, such as an assignme of mailing or transmission.	for any other accompany			
Jonathan P. Osha ROSENTHAL & OSHA L.L.P. Suite 2800 1221 McKinney Street Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the UST States Postal Service with sufficient postage for first class mail in an envaderessed to the Mail Stop ISSUE FEE address above, or being factors and transmitted to the USPTO (703) 746-4000, on the date indicated below.										
Houston, TX 77010)) 12/08/2004 MWD	LDGE2 00000020	10601069			(Depositor's na			
		01 FC:1501		1370.00 QP		(Signat				
		02 FC:1504 03 FC:8001		300.00 OP 12.00 OP		····	(D			
APPLICATION NO.		FILING DATE FIRST NAMED INVI			NTOR ATTORNEY DOCKET NO. CONFIRMATION N					
10/601,069	06/20/2003			Shigeru Murayam	na	02008.111001	8898			
TITLE OF INVENTION: CO	ONN	IECTOR	8							
APPLN. TYPE		SMALL ENTITY	ISSUE FI	EE PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	i	NO	\$1330)	\$300	\$1630	12/20/2004			
EXAM	EXAMINER A			іт сі	ASS-SUBCLASS					
NGUYEN, PH	NGUYEN, PHUONGCHI T 2833 439-108000									
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address form PTO/SB/122 attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.										
3. ASSIGNEE NAME AND	RÉS	SIDENCE DATA TO B	E PRINTED ON T	HE PATENT (print o	or type)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNI	EE'		(В) RESIDENCE: (CIT	Y and STATE OR COU	JNTRY)				
Advantest Co	orp	oration	·	1-32-1, As	ahi-cho, Ner an 179-007	ima-ku				
Please check the appropriate	assi	gnee category or categor	ries (will not be pri	nted on the patent):	☐ Individual Co	orporation or other private gr	oun entity Governm			

•		0110011	 upp	TOPII	arc a	SSIBIN		category	O.	categories	(4111 1101	oc pi	micu o
	_	_					_						

4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):

Issue Fee

Advance Order - # of Copies _

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

Deposit Account Number

The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number 50-0591 (enclose an extra copy of this form). (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

Publication Fee (No small entity discount permitted)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Typed or printed name Jonathan P. Osha

Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (11-04)

l Hadar the Boo	onund Roduction A	ct of 1995, no no	rson are required to	U.S. Pater	nt and Trademarl	k Office: U.S.	. DEPARTMEN	5. OMB 0651-0032 T OF COMMERCE AB control number
$\overline{}$				respond to a conecti		lete if Kr		NB COM OF HUMBER
⊮ FEE	TRAN	SMIT	TAL	Application Nu			59-Conf. #8	898
J	5 FV	2005		Filing Date		June 20,	2003	
	for FY	ZUU 3		First Named In	ventor	Shigeru N	/lurayama	
Effective 10/	01/2004. Patent fees	are subject to annu	ual revision.	Examiner Name		P. T. Ngu	iyen	
Applicant	claims small entity	status. See 37	CFR 1.27	Art Unit		2833	·	
TOTAL AMOUN	T OF PAYMEN	IT (\$)	1,682.00	Attomey Docke	t No.	02008/11	1001	
METHO	D OF PAYMEN	IT (check all tha	t apply)		FEE CALC	ULATION	(continued)	
Check	X Credit Ca	ard Mc	ney Order	2. EXTRA CL	AIM FEES		-	
X Deposit Ac	لتا		_	Fee Descript			Fee (\$)	Small Entity Fee (\$)
Deposit	50.0	504	7					
Account Number	50-0	591		Each claim over	20		18	9
Deposit Account	Osha & M	ay L.L.P.		Each independen	t claim over 3		88	44
Name L	uthorized to: (check	all that apply)		Multiple depende	ent claims		300	150
	ee(s) indicated below			For Reissues, eac more than in the	ch claim over 2 he original pate		18	9
Charge a	ee(s) indicated below, iny additional fee(s) o CFR 1.16 and 1.17			For Reissues, eac more than in th	ch independent he original pate		88	44
X Credit an	y overpayments			Total Claims	Extra	Claims	Fee (\$)	Fee Paid (\$)
To the above-iden	tified deposit accou	nt.			or HP =	x al claims pai	d for, if greater t	han 20
Other (please	identify):			Indep. Claims		Claims	Fee (\$)	Fee Paid (\$)
	FEE CALC	JLATION		-:	3 or HP =	x	=	
4 04010 511 1110				HP= highest number		claims paid		
1. BASIC FILING	• FEE			Multiple Deper	ndent Claims		Fee (\$)	Fee Paid (\$)
Fee Description	n <u>Fee (\$)</u>	Small Entity Fee (\$)	Fee Paid (\$)			Subt	total (2) \$	0.00
Utility Filing Fee	790	395		3. OTHER FEE	S			
Othing Pining Fee	730	373		Fee Descr	-	<u>5</u> Fee (\$)	mall Entity Fee (\$)	Fee Paid
				1-month extension		110	55	
Design Filing Fee	350	175		2-month extension	of time	430	215	
				3-month extension	of time	. 980	490	
				4-month extension	of time	1,530	765	
Plant Filing Fee	550	275		5-month extension	of time	2,080	1,040	
				Information disclos	sure stmt. Fee	180	180	
1				37 CFR 1.17(q) pro	cessing fee	50	50	·
Reissue Filing Fee	790	395		Non-English specif	ication	130	130	
				Notice of Appeal		340	170	
				Filing a brief in sup	-	340	170	
Provisional Filing	Fee 160	80		Request for oral her 1504; 8001; Other: or normal pu color; Utility	1501 Publication blication; Printed			1,682.00
	Subt	total (1) \$	0.00	Ī		Sub	total (3) \$	1,682.00
SUBMITTED BY								
Signature	1 7			Registration No.	45,079	Telephone	(713)	228-8600
	Thomas IV 2			(Attorney/Agent)	1	· · · · · · · · · · · · · · · · · · ·		per 6, 2004
Name (Print/Type)	Thomas K. So	cnerer				Date	Decemb	JEI 0, 2004

I hereby certify that this correspon in an envelope addressed to: Cor	dence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 535681886 US, amissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. Signature: Change Ch
Dated: December 6, 2004	Signature: Charlette Cookingham)